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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Connelly, Chad, , ,							
	(b) Address (number and street) 572 John Ross Parkway Suite 107-203	☐ Check if address changed				Candidate's FEC Identification Number     H8SC05141		
	) City, State, and ZIP Code						ew Amended	
	Rock Hill	ock Hill SC 29730				Statement (N	I) <b>OR</b> (A)	
4.	Party Affiliation	5. Office Soug	ıht		6. State & Distr	rict of Candidate		
	REPUBLICAN PARTY	House			SC	05		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2017 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
Connelly for Congress								
	(b) Address (number and street) 572 John Ross Parkway Suite 107-203							
	(c) City, State, and ZIP Code							
	Rock Hill				SC	29730		
(Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.								
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
(b) Address (number and street)								
	(c) City, State, and ZIP Code							
	I certify that I have exa	mined this Stat	tement and to	the best of	my knowledge a	nd belief it is true, correct	and complete.	
Si	gnature of Candidate					Date		
C	onnelly, Chad, , ,	[Electronically Filed]				02/13/2017		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								
1		1			1			

FEC FORM 2 (REV. 02/2009)

## : 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F2N Transaction ID:

2017 Special Election.

Form/Schedule: Transaction ID: